

RESIDENT CENTERED CARE AND QUALITY OF LIFE

In order for an educational course to satisfy this domain, the course curriculum should have covered the majority of the following areas.

Federal and state standards and regulations; Aging process (psychosocial); Aging process (physiological); Basic principles and concepts of nursing; Basic principles of restorative nursing; Basic principles of rehabilitation; Basic principles of infection control; Basic principles and regulations for handling, administration, labeling, record keeping, and destruction/disposal of drugs and biologicals; Basic principles of pain management; Basic principles of wound prevention and skin care management; Basic principles of chemical and physical restraints; Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process; Admission, transfer, bed hold, and discharge requirements and regulations; Techniques for auditing resident care and service outcomes; Roles and relationship of resident care staff and consultants; Emotional, psychosocial, spiritual, financial, and legal service needs of residents; Interpersonal relationships and group dynamics; Available resources (e.g., community, social, financial); Basic principles of hospice and palliative care; Grieving process; Death and dying; Resident Rights; Advance directives; Basic nutritional requirements; Basic principles of food storage, handling, preparation, and presentation; Resident dining experience; Meal frequency; Therapeutic or specialized diets; Principles of dietary sanitation; Nutritional supplements; Basic medical terminology; Provision of basic specialty medical services (e.g., optometry, podiatry, dental, psychiatry, psychology, audiology); Physician services (e.g., frequency of visits, physician/resident relationship, accessibility); Role of Medical Director; Provision of emergency medical services; Quality assurance processes as they relate to resident care and services; Basic elements of a therapeutic recreation/activity program; Basic elements of a social services program; Medical record content, format, and documentation requirements; Confidentiality and safeguarding medical record information; Center for Medicare and Medicaid Services (CMS) quality indicators and measures; Multi-cultural needs of residents; Resident/person centered care; Transportation requirements for residents; Disaster preparedness; Ethical decision making.

Source: NAB Nursing Home Administrators Licensing Examination – Information for Candidates – April 2009

HUMAN RESOURCES

In order for an educational course to satisfy this domain, the course curriculum should have covered the majority of the following areas.

Federal and state standards and regulations (e.g., Family Medical Leave Act, Occupational Health and Safety Act, Americans with Disabilities Act, Equal Employment Opportunity Commission, immigration law, Health Information Portability and Accountability Act); Methods of communication (e.g., formal and informal, verbal and non-verbal); Technology (e.g., e-mail, voice mail, computer software); Criminal background checks/nursing assistant registry; Employee interview techniques; Facility staffing needs and requirements; Staff position qualifications; Staff licensure requirements; Staff education/in-service requirements; Confidentiality requirements; Recruitment and retention methods; Employment history and verification methods; Drug-free workplace program; Mandatory reporting requirements; Staff development requirements, resources, and models; Employee discipline and grievance process; Staff recognition and appreciation programs; Employee evaluation process; Safety programs and requirements; Worker's compensation rules and procedures; Professional ethics; Compensation and benefit programs (e.g., employee assistance programs, insurance, salary, retirement); Disaster preparedness; Diversity (e.g., cultural, spiritual, ethnic, socioeconomic, sexual); Succession planning /leadership development; Union and labor relations

Source: NAB Nursing Home Administrators Licensing Examination – Information for Candidates – April 2009

FINANCE

In order for an educational course to satisfy this domain, the course curriculum should have covered the majority of the following areas.

Federal and state regulations affecting nursing home reimbursement; Budgeting methods and financial planning; Accounting methods (e.g., Generally Accepted Accounting Practices [GAAP], cash and accrual) and regulatory requirements; Financial statements (e.g., income statement, balance sheet, statement of cash flows) and measures (e.g., operating margin, days cash on hand, per patient day [PPD] analysis); Reimbursement sources and methods (e.g., Centers for Medicare and Medicaid Services [CMS], managed care, Resource Utilization Groups [RUGS], Prospective Payment Systems [PPS]); Additional revenue sources (e.g., fund raising, grants, ancillary services); Internal controls (e.g., segregation of duties, reconciliation, audits); Payroll procedures and documentation; Billing, accounts receivable, and collections management; Accounts payable procedures; Eligibility and coverage requirements from third party payors; Resident trust fund; Importance of integration of clinical and financial systems (e.g., MDS, case mix); Contracts (e.g., pharmacy, hospice, managed care, therapy); General and professional liability insurance (e.g., property, clinical, governing body, workers compensation)

Source: NAB Nursing Home Administrators Licensing Examination – Information for Candidates – April 2009

ENVIRONMENT

In order for an educational course to satisfy this domain, the course curriculum should have covered the majority of the following areas.

Federal and state standards and regulations for buildings, grounds, equipment and maintenance including ADA, OSHA, Life Safety Codes, and NFPA; Preventative maintenance programs for buildings, grounds, and equipment; Roles of environmental staff (e.g., housekeeping, maintenance, laundry); Waste management, including infectious waste; Basic sanitation and infection control concepts and procedures (e.g., personal protective equipment, universal precautions); Potential hazards (e.g., biohazards, blood-borne pathogens, hazardous materials); Basic housekeeping, maintenance, and laundry requirements; Pest control; Resident and facility security measures (e.g., elopement prevention, monitoring devices, access control); Fire and disaster preparedness; Community emergency resources; In-house emergency equipment; Evacuation resources and requirements (e.g., transfer agreements, transportation); Design principles that create a home-like atmosphere Analyzing physical plant needs; Recognizing environmental impact on residents; Analyzing and interpreting effectiveness of quality assurance data related to environmental service and safety outcomes; Interpreting and applying safety codes; Interpreting and implementing life safety codes; Crisis management; Interpersonal communication

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LEADERSHIP AND MANAGEMENT

In order for an educational course to satisfy this domain, the course curriculum should have covered the majority of the following areas.

Federal and state regulations, agencies, and programs (e.g. Centers for Medicare and Medicaid Services (CMS), Occupational Safety and Health Administration (OSHA), Americans with Disabilities Act (ADA), Fair Labor Standards Act (FLSA), Equal Employment Opportunity Commission (EEOC), Safe Medical Devices Act (SMDA), Health Information Portability and Accountability Act [HIPAA]); Corporate compliance; Legal liability of the facility; Legal and criminal liability of administrator; Legal and criminal liability of other staff members; Legal and criminal liability of governing entities; Roles and responsibilities of governing entities; Codes of ethics and standards of practice; Quality improvement models (e.g., continuous quality improvement [CQI], quality assurance [QA], total quality management [TQM]); Facility licensing requirements; Types of surveys (e.g., certification, annual, extended, complaint, life safety); Survey process (e.g., scope and severity grid, acceptable plan of correction, Informal Dispute Resolution [IDR], appeals process, remedies); CMS quality indicators reports, on-line survey certification reports (OSCAR), and other available systems/reports for outcome measurement; Management information systems; Technology to support facility operations (e.g., medical, security, environmental, work-place safety); Services available in the healthcare continuum; Role of the facility in the healthcare continuum; Resource management; Functions of all departments and services provided; Management principles and philosophies; Leadership principles and philosophies; Methods for assessing and monitoring resident's and family's/responsible party's satisfaction with quality of care and quality of life; Grievance procedures for residents and families/responsible parties; Internal investigation protocols and techniques; Resident Rights; The role of the resident ombudsman; Risk management principles; Public relations and marketing techniques; Culture change concepts for providing resident/person-centered care.

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